

**COLLIN COUNTY  
PERSONNEL ACTION FORM**

NAME: SULLIVAN CURTIS JAY			DATE: 4-13-89
LAST FIRST MIDDLE			DEPARTMENT: Jail
SOCIAL SEC. NO.: 283-68-1619			

<b>EMPLOYMENT</b>	Employment Date: 4-17-89	Job Title: Jailer (S2/A)		SALARY: \$1442.00
	Previously Employed:	Original Employment Date:	Separation Date:	Supervisor:
ELIGIBILITY DATES: (For Office Use Only)		Vacation Days:	Sick Leave:	Insurance: (Medical) Self Dependents

<b>Salary and/or title change</b>	Current Job Title	Current Salary	Range	Step
	New Job Title	New Salary	Range	Step
Reason: <input type="checkbox"/> Satisfactory Performance <input type="checkbox"/> Unsatisfactory Performance <input type="checkbox"/> Exceptional Merit				

<b>TRANSFER</b>	FROM:	TO:	<b>SICK LEAVE</b>	Dates of Sick Leave:
	FROM:	TO:		Previous Days Sick Leave Taken This Year:
<b>LEAVE OF ABSENCE</b> <i>Give Reason</i>	DATE:	<input type="checkbox"/> Ins. Notified		Was Doctor's Statement Furnished? <input type="checkbox"/> Yes <input type="checkbox"/> No

<b>VACATION</b>	Date Requested - From:	To:	Total Work Days Away	Previous Days Taken This Year
<b>SEPARATION</b>	Employment Date	Last Day Worked	Rehire? <input type="checkbox"/> Yes <input type="checkbox"/> No Explain	
	Vac. Pay No. Hrs.	Amt. Paid	Comp. Pay No. Hrs.	Amt. Paid

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Voluntary Retirement             | <input type="checkbox"/> Return To School                | <input type="checkbox"/> Insubordination                        |
| <input type="checkbox"/> Mandatory Retirement. Co. Policy | <input type="checkbox"/> Family Problems                 | <input type="checkbox"/> Reporting Under Influence of Alcohol   |
| <input type="checkbox"/> Death                            | <input type="checkbox"/> Resignation For Other Reasons   | <input type="checkbox"/> Drinking On Duty                       |
| <input type="checkbox"/> Illness or Injury                | <input type="checkbox"/> Reduction In Force              | <input type="checkbox"/> Destruction or Removal Of Co. Property |
| <input type="checkbox"/> Leaving Area                     | <input type="checkbox"/> Habitually Absent or Tardy      | <input type="checkbox"/> Falsification of County Records        |
| <input type="checkbox"/> Accept Other Job                 | <input type="checkbox"/> Unreported Absence              | <input type="checkbox"/> Misconduct                             |
| <input type="checkbox"/> Dissatisfied                     | <input type="checkbox"/> Leaving Work Without Permission | <input type="checkbox"/> Other (Explain in comments)            |

How Many Days Advance Notice Given?

COMMENTS:

Dated this 17th day of April, 19 89

Wm J Roberts  
COUNTY JUDGE

EFFECTIVE DATE: 4-17-89

DATE

DATE

DATE

EMPLOYEE (IF APPLICABLE)

DEPARTMENT HEAD

PERSONNEL DIRECTOR